

Article - Health - General

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§5–608.

(a) (1) Certified or licensed emergency medical services personnel shall be directed by protocol to follow emergency medical services “do not resuscitate orders” pertaining to adult patients in the outpatient setting in accordance with protocols established by the Maryland Institute for Emergency Medical Services Systems in conjunction with the State Board of Physicians.

(2) Emergency medical services “do not resuscitate orders” may not authorize the withholding of medical interventions, or therapies deemed necessary to provide comfort care or to alleviate pain.

(3) A health care provider, other than certified or licensed emergency medical services personnel, who sees, in a valid form, an emergency medical services “do not resuscitate order” described in paragraph (1) of this subsection that is not superseded by a subsequent physician’s order:

(i) May, before a patient’s cardiac or respiratory arrest, provide, withhold, or withdraw treatment in accordance with the emergency medical services “do not resuscitate order”; and

(ii) Shall, after a patient’s cardiac or respiratory arrest, withhold or withdraw treatment in accordance with the emergency medical services “do not resuscitate order”.

(4) An order contained in a “Medical Orders for Life–Sustaining Treatment” form that resuscitation not be attempted shall be given the same effect as emergency medical services “do not resuscitate orders” described in paragraph (1) of this subsection.

(b) This section does not authorize emergency medical services personnel to follow an emergency medical services “do not resuscitate order” for any patient who, prior to cardiac or respiratory arrest, is able to, and does, express to those personnel the desire to be resuscitated.

(c) This section does not authorize emergency medical services personnel in the outpatient setting to follow an emergency medical services “do not resuscitate order” that is in any form other than:

(1) An emergency medical services “do not resuscitate order” described in subsection (a) of this section;

(2) An oral emergency medical services “do not resuscitate order” provided by an online, emergency medical services medical command and control physician;

(3) An oral emergency medical services “do not resuscitate order” provided by a physician, a physician assistant, or a nurse practitioner who is physically present on the scene with the patient and the emergency medical services personnel in the outpatient setting; or

(4) An order contained in a “Medical Orders for Life–Sustaining Treatment” form.

(d) (1) Except as provided in paragraph (2) of this subsection, in addition to the immunity provided in § 5–609 of this subtitle and any other immunity provided by law, an emergency medical services provider is not subject to criminal or civil liability, or deemed to have engaged in unprofessional conduct as determined by the appropriate licensing or certifying authority, arising out of a claim concerning the provision of health care if:

(i) The claim is based on lack of consent or authorization for the health care;

(ii) Subsection (a) of this section would ordinarily apply; and

(iii) The emergency medical services provider:

1. Acts in good faith in providing the health care; and

2. Believes reasonably that subsection (a)(1) of this section does not apply.

(2) This subsection does not apply if the patient is wearing a valid, legible, and patient–identifying emergency medical services “do not resuscitate order” in bracelet form.

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